

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &				1. REQUISITION NUMBER IDT99200005100		PAGE 1 OF 83	
2. CONTRACT NO.		3. AWARD/EFFECTIVE DATE		4. ORDER NUMBER		5. SOLICITATION NUMBER JPO500-99-R-0202	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME Kim Nichols or Pete Zawoiski		b. TELEPHONE NUMBER (No collect calls) (215)697-0557 or 0546		6. SOLICITATION ISSUE DATE November 1, 1999	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME Kim Nichols or Pete Zawoiski		b. TELEPHONE NUMBER (No collect calls) (215)697-0557 or 0546		8. OFFER DUE DATE/LOCAL TIME December 1, 1999	
9. ISSUED BY DEFENSE SUPPLY CENTER PHILADELPHIA		CODE SC0500		10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED <input checked="" type="checkbox"/> SET ASIDE: _____ % FOR <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> SMALL DISADV. BUSINESS <input type="checkbox"/> 8(A) SIC: _____ SIZE STANDARD _____		11. DELIVERY FOR FOREIGN DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) 13b. RATING To be shown on each Order 14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP	
15. DELIVER TO To be specified on each delivery order.		CODE		16. ADMINISTERED BY Defense Supply Center Philadelphia 700 Robbins Avenue Philadelphia, PA 19111-5096		CODE SC0500	
17a. CONTRACTOR/OFFEROR		CODE		17a. FACILITY CODE		18a. PAYMENT WILL BE MADE DFAS Columbus Center Attn: DFAS - CO-SEI P.O. BOX 182317 Columbus, OH 43218-6238	
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER.		18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18A UNLESS BLOCK BELOW IS		<input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/SERVICES SEE SCHEDULE OF SUPPLIES APPENDIX A, PAGE 70 (Attach Additional Sheets as Necessary)		21. QUANTITY		22. UNIT	
23. UNIT PRICE		24. AMOUNT					
25. ACCOUNTING AND APPROPRIATION DATA				26. TOTAL AWARD AMOUNT (For Govt Use Only) \$20 Million Estimated			
<input checked="" type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3, AND 52.212-5 ARE ATTACHED.				<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.			
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED.				<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.			
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN _____ COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS HEREIN.				29. AWARD OF CONTRACT: REFERENCE _____ OFFER DATED _____ <input type="checkbox"/> YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT)		31c. DATE SIGNED	
32a. QUANTITY IN COLUMN 21 HAS BEEN <input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED		32c. Date		33. SHIP NUMBER <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		34. VOUCHER NUMBER	
32b. SIGNATURE OF AUTHORIZED GOVT. REPRESENTATIVE		32c. Date		36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		37. CHECK NUMBER	
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT		41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		41c. DATE		42a. RECEIVED BY (Print) 42b. RECEIVED AT (Location) 42c. DATE REC'D (YY/MM/DD) 42d. TOTAL CONTAINERS	